



You have the right to control whether we share some of your personal information. Please read the following information carefully before you make your choices below.

This privacy notice applies to the following Washington Mutual companies and divisions: Long Beach Mortgage Company; Washington Mutual Bank; Washington Mutual Bank fsb; Washington Mutual Bank, FA; WMBFA Insurance Agency, Inc.; Washington Mutual Finance; Washington Mutual Finance Group, LLC; Washington Mutual Finance of Florida, LLC; Washington Mutual Finance of Mississippi, LLC; Washington Mutual Finance of North Carolina, LLC; Washington Mutual Finance of Virginia, LLC; Washington Mutual Finance, Inc.; Washington Mutual Finance, LLC; WMFS Insurance Services of Nevada, Inc.; WMFS Insurance Services, Inc.; WM Financial Services, Inc.; WM Insurance Agency, Inc.; Washington Mutual Insurance Services, Inc.; Western Bank; Washington Mutual Finance, Inc. of Kansas; Washington Mutual Finance, LP; Commerce Service Corporation; Norstar Mortgage Corp; WM Specialty Mortgage LLC; California Reconveyance Company; Aristar Mortgage Company.

Your Rights

You have the following rights to restrict the sharing of personal and financial information with our affiliates (companies we own or control) and outside companies that we do business with. Nothing in this form prohibits the sharing of information necessary for us to follow the law, as permitted by law, or to give you the best service on your accounts with us. This includes sending you information about some other products or services.

TEAR ALONG DOTTED LINE

Your Choices

- **Restrict Information Sharing With Companies We Own or Control (Affiliates):**

Unless you say "No," we may share personal and financial information about you with our affiliated companies.

☐ NO, please do not share personal and financial information with your affiliated companies.

- **Restrict Information Sharing With Other Companies We Do Business With To Provide Financial Products And Services:**

Unless you say "No," we may share personal and financial information about you with outside companies we contract with to provide financial products and services to you.

☐ NO, please do not share personal and financial information with outside companies you contract with to provide financial products and services.

Time Sensitive Reply

You may make your privacy choice(s) at any time. Your choice(s) marked here will remain unless you state otherwise. However, if we do not hear from you we may share some of your information with affiliated companies and other companies with whom we have contracts to provide products and services.

FOLD

FOLD

Name: _____

Account or Policy Number(s): _____

Signature: _____

To exercise your choices, do **one** of the following:

- Fill out, sign and send back this form to us by folding up and sealing all three sides. Place a stamp on the outside where indicated and mail. (You may want to make a copy for your records);

OR

- Call this toll-free number: [place phone number here];

OR

- Fill out, sign and fax this form to us at this toll-free number: [place phone number here].

[place form number here]

SEAL HERE

SEAL HERE

SEAL HERE